| Fill in this information | on to identify your case: | |
|---------------------------------|---|---|
| Debtor 1 | Francis D. Miller | - |
| Debtor 2 (Spouse, if filing) | | - |
| United States Bank | ruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA | - |
| Case number | 1:17-bk-01654 | Check if this is: |
| (If known) | | An amended filing |
| | | ☐ A supplement showing postpetition chapter |
| | | 13 income as of the following date: |
| Official For | <u>m 106l</u> | MM / DD/ YYYY |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| rt 1: Describe Employment | | | |
|---|-----------------------|--|--|
| Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse |
| If you have more than one job, | Empleyment status | ■ Employed | ■ Employed |
| attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed |
| employers. | Occupation | Truck Driver | Assembly |
| Include part-time, seasonal, or self-employed work. | Employer's name | York Concrete Company | Specialty Industries Inc. |
| Occupation may include student or homemaker, if it applies. | Employer's address | 135 Bentz Mill Road East Berlin, PA 17316 | 175 E. Walnut Steet Red Lion, PA 17356-9998 |
| | How long employed the | here? 1 Month | 13 Years, 0 Months |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Dobtor 1 For Dobtor 2 or

| | | | | FOI DEDIOI I | | filing spouse |
|----|--|----|------|--------------|------|---------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$_ | 5,918.47 | \$ | 4,329.43 |
| 3. | Estimate and list monthly overtime pay. | 3. | +\$_ | 0.00 | +\$_ | 0.00 |
| 4. | Calculate gross Income. Add line 2 + line 3. | 4. | \$_ | 5,918.47 | \$_ | 4,329.43 |

Official Form 106l Schedule I: Your Income page 1

Case 1:17-bk-01654-HWV Doc 76 Filed 06/20/22 Entered 06/20/22 11:08:21 Desc

Page 1 of 4

Main Document

| Deb | tor 1 | Francis D. Miller | | Case | number (if known) | 1:17- | bk-01654 | |
|-----|-------------------------------|---|-------------|-----------|-------------------|----------|------------------------------------|-----|
| | Con | by line 4 here | 4. | For | Debtor 1 5,918.47 | | Debtor 2 or filing spouse 4,329.43 | |
| | | | | ~ | 0,010.41 | <u> </u> | 4,020.40 | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$_ | 1,769.17 | \$ | 867.12 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | 253.50 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | »— | 155.46 | |
| | 5e. | Insurance | 5e. | \$_ \$ | 0.00 | \$ | 163.19 | |
| | 5f. | Domestic support obligations Union dues | 5f. | * * | 0.00 | • — | 0.00 | |
| | 5g. 5h. | | 5g. 5h.⊣ | · · — | 0.00 | , ¢— | 0.00 | |
| | | Other deductions. Specify: | 511.7 | · — | 0.00 | ΤΨ | 0.00 | |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 1,769.17 | \$ | 1,439.27 | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 4,149.30 | \$ | 2,890.16 | |
| 8. | List 8a. | profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 90 | Ф | 0.00 | ¢ | 0.00 | |
| | 8b. | monthly net income. Interest and dividends | 8a. 8b. | \$_ \$ | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$ \$ | 0.00 | Ψ \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f. | \$ | 0.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | - \$ | 0.00 | + \$ | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 0.00 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 4,149.30 + \$ | 2,8 | 90.16 = \$ 7,039 | .46 |
| 11. | Stat Inclu othe Do i | te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify: | ır depen | | • | | | .00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certilies | | | | | 12. \$ 7,039 | .46 |

Official Form 106I Schedule I: Your Income page 2 Case 1:17-bk-01654-HWV Doc 76 Filed 06/20/22 Entered 06/20/22 11:08:21 Desc Page 2 of 4

Main Document

Yes. Explain:

13. Do you expect an increase or decrease within the year after you file this form?

Combined monthly income

| Fill | n this info | ormation to identify yo | our case: | | | | | | | | |
|----------------------------|------------------------------------|---|--|---|---|---------------------|-------------------|-------------------------------|--|--|--|
| Debtor 1 Francis D. Miller | | | | | | | Check if this is: | | | | |
| | | | | | | ■ An amended filing | | | | | |
| Deb | tor 2 | | | | | | A supplement show | ving postpetition chapter | | | |
| (Spc | ouse, if filing | g) | | | | | 13 expenses as of | the following date: | | | |
| Unit | ed States E | Bankruptcy Court for the | : MIDDLI | E DISTRICT OF PENNSYL | _VANIA | | MM / DD / YYYY | | | | |
| l | e numbe r nown) | 1:17-bk-01654 | | | | | | | | | |
| Of | ficial | Form 106J | | | | | | | | | |
| | | ıle J: Your | Exper | ises | | | | 12/15 | | | |
| Be info | as compl rmation. nber (if k | ete and accurate as If more space is ne nown). Answer eve | s possible eded, atta ry questio | . If two married people ar | | | | or supplying correct | | | |
| Par 1. | | escribe Your House i joint case? | hold | | | | | | | | |
| ٠. | | | | | | | | | | | |
| | | So to line 2. Does Debtor 2 live | in a conar | ata hausahald? | | | | | | | |
| | | | iii a sepai | ate nousenolu: | | | | | | | |
| | | □ No □ Yes. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | hold of Deb | otor 2. | | | | |
| 2. | Do you | have dependents? | ■ No | | | | | | | | |
| | Do not li Debtor 2 | st Debtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? | | | |
| | Do not s | state the | | | | | | □ No | | | |
| | depende | ents names. | | | | | | ☐ Yes | | | |
| | | | | | | | | □ No | | | |
| | | | | | | | | ☐ Yes | | | |
| | | | | | | | | □ No | | | |
| | | | | | | | | ☐ Yes | | | |
| | | | | | | | | □ No □ Yes | | | |
| 3. | Do vour | expenses include | _ | Na | | | | □ res | | | |
| | expense yoursel | es of people other t f and your depende | han nts? □ | No Yes | | | | | | | |
| Est exp app | mate you enses as licable d | of a date after the late. | our bankri bankruptc | yptcy filing date unless y y is filed. If this is a supp | lemental <i>Schedul</i> e | | | | | | |
| the | | such assistance an | | government assistance it cluded it on <i>Schedule I:</i> Y | | | Your expe | enses | | | |
| 4. | | tal or home owners ts and any rent for th | | ses for your residence. In | nclude first mortgage | 4. \$ | . | 0.00 | | | |
| | If not in | cluded in line 4: | | | | | | | | | |
| | 4a. R | eal estate taxes | | | | 4a. \$ | 5 | 0.00 | | | |
| | 4b. Pi | roperty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 | | | |
| | | ome maintenance, re | • | | | 4c. \$ | | 110.00 | | | |
| _ | | omeowner's associat | | | | 4d. \$ | · | 0.00 | | | |
| 5. | Additio | nal mortgage paym | ents for yo | our residence , such as ho | me equity loans | 5. \$ | 5 | 0.00 | | | |

Official Form 106J Schedule J: Your Expenses page 1

| Del | otor 1 | Francis D. Miller | Case num | ber (if known) | 1:17-bk-01654 |
|-----|-------------|--|----------|----------------|-------------------------------|
| 6. | Utilit | ies. | | | |
| 0. | 6a. | Electricity, heat, natural gas | 6a. | \$ | 537.73 |
| | 6b. | Water, sewer, garbage collection | 6b. | · | 40.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | | 120.00 |
| | 6d. | Other. Specify: | 6d. | · | 0.00 |
| 7. | | I and housekeeping supplies | 7. | · - | 675.00 |
| 8. | | dcare and children's education costs | 8. | \$ | 0.00 |
| 9. | - | ning, laundry, and dry cleaning | 9. | \$ | 100.00 |
| - | | onal care products and services | 10. | \$ | 100.00 |
| 11. | | ical and dental expenses | 11. | · | 75.00 |
| | | sportation. Include gas, maintenance, bus or train fare. | | Ψ | 73.00 |
| | | ot include car payments. | 12. | \$ | 400.00 |
| 13. | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 14. | Char | itable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insu | rance. | | | |
| | | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insurance | 15a. | · <u> </u> | 57.33 |
| | 15b. | Health insurance | 15b. | · <u> </u> | 0.00 |
| | 15c. | Vehicle insurance | 15c. | · | 230.00 |
| | 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | _ | |
| | Spec | • | 16. | \$ | 0.00 |
| 17. | | Illment or lease payments: | | _ | |
| | | Car payments for Vehicle 1 | 17a. | T | 0.00 |
| | | Car payments for Vehicle 2 | 17b. | · - | 0.00 |
| | | Other. Specify: | 17c. | * | 0.00 |
| | | Other. Specify: | 17d. | \$ | 0.00 |
| 18. | | payments of alimony, maintenance, and support that you did not report as | 18. | \$ | 0.00 |
| 10 | | icted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 10. | \$ | |
| 19. | Spec | r payments you make to support others who do not live with you. | 19. | Φ | 0.00 |
| 20 | | er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e | - | our Incomo | |
| 20. | | Mortgages on other property | 20a. | | 0.00 |
| | | Real estate taxes | 20b. | | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | · <u> </u> | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | Homeowner's association or condominium dues | 20a. | · | 0.00 |
| 21 | | r: Specify: Wife Auto Loan | 21. | · | 580.51 |
| ۷۱. | | | | +\$ | |
| | | acco Expense • Auto Loan | | +\$ | 80.00 851.27 |
| | WITE | e Auto Loan | | -φ | 031.27 |
| 22. | Calc | ulate your monthly expenses | | | |
| | 22a. | Add lines 4 through 21. | | \$ | 3,956.84 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,956.84 |
| | | , , , | | _ · — | |
| 23. | | ulate your monthly net income. | | • | |
| | | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | · - | 7,039.46 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,956.84 |
| | 00 - | Out to a first and a small the same area of the same and the bid and a | | | |
| | 23C. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | 3,082.62 |
| | | The result is your monthly het income. | 200. | | , |
| 24. | For exmodif | ou expect an increase or decrease in your expenses within the year after you wample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage? | | | ease or decrease because of a |
| | ■ N | | | | |
| | ☐ Y | es. Explain here: | | | |